Department of Labor and Industries WISHA Services Division Charter Boats PO Box 44650 Olympia WA 98504-4650



## **CHARTER VESSEL INSPECTION**

## Department use only

Last inspection	
Last dry dock inspection	
License number	
Issue date	
# Passengers allowed	
# Crew required	

Vessel's name	Body of water certified to perform commercial business									
Owner's name						]	Phone nu	mber		
Owner's address (pla	State ZIP+4									
Vessel length (ft)	Beam (ft)	Depth (main deck to kee	el, ft) Cit	y and state vess	sel built (ma	nufacturer)			Year	
Gross tonnage		Class of service (passen	ger, cargo	)			F	Tuel Type		
Hull construction			No. of e	engines	No. of cy	vlinders per engine	Horsep	ower per engine	No. of shafts	
Insurance policy #		Insurance policy issued			Date insurance			ce policy expires		
Licensed operator's name			License number		Date renewal exa	Pate renewal exam due (every 5 yrs)		Date First Aid, CPR expires		
						(every 5 yis	,			
Per RCW 88	.04.035(1)	and RCW 88.04.04	45(1), t	he above	informa	ation is true a	nd co	rrect		
Date	Own	Owner/Applicant's signature								